									plication or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									9/846566				
CLAIME ACEUED DADY												-	
	- · · · · · · · · · · · · · · ·	CLAIMS AS	(Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10					RATE	FEE	1	RATE	FEE	
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			10 minus 20=		· Ø			X\$ 9=		OR	X\$18 =.		
INDEPENDENT CLAIMS			minus 3 =		Ø			X40=		OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR	+270=		
• If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL	<u> </u>	OR	TOTAL	7/6	
	CLAIMS AS AMENDED - PART II										OTHER		
4	605	(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		RIGH NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
	Total	. 17	Minus	-20	9	= /-		X\$ 9=		OR	X918=		
	Independent	· 6	Minus	<u>G</u>)	-2		X40=		OR) ਹ ਹ X80 =	100	
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM			+135=	•••	OR	+270=	·	
								TOTAL		ا ۱	TOTAL	100	
		(Column 1)		(Colu	mn 2\	(Column 2)	4	ADDIT. FEE		On .	ADDIT. FEE	400 /	
		CLAIMS		HIGH		(Column 3)	" ,		4001	_		4001	
AMENDMENT B		REMAINING : AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	-40		=		X\$ 9=	,	OR	X\$18=	بالماء فأدر	
	Independent	•	Minus	***	•	-		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		1	+135=			+270=		
•	•									OR	+27U= TOTAL		
		TOTAL ADDIT. FEE	•	OR	ADDIT. FEE								
		(Column 1) CLAIMS		(Colur		(Column 3)	1 -			, .		:	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVK PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total · · ·	•	Minus	**		= .		X\$ 9=	. = -	OR	X\$18=		
	Independent	•	Minus .	***		=]	X40=			X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	/		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
**	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE OF TOTAL ADDIT. FEE												
		nber Previously Pai					ar fou	and in the ac	propriate box	r in coi	lumn 1.	بمنتخر	